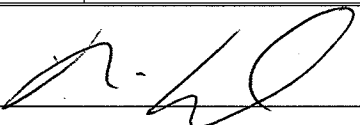



SOLICITATION NUMBER: RFB 7405	OPENING DATE: May 24, 2016
SUPPLIES OR SERVICES: SOLID WASTE ABATEMENT SERVICES	

OFFEROR / BIDDER	
Advance Demolition	No total was provided in the bid
Anton's Service	\$12,600.00

Date: 5/24/16
 Bid Officer: 
 Bid Clerk: 

This abstract ONLY indicates the APPARENT low bidder. Conditions that may displace an apparent low bidder include, but are not limited to: math errors, conditioning of bid, mistake in bid, failing pre-award Survey, and the bid being non responsive.

Bids  
Received



4263 OCEANSIDE BLVD. SUITE 106 #202  
OCEANSIDE, CA 92056



PLANNING & DEVELOPMENT SVCS.

"RFB - 7405"

**REQUEST FOR BID (RFB) 7405**  
**PLANNING & DEVELOPMENT SERVICES**  
**AS NEEDED SOLID WASTE ABATEMENT SERVICES**  
**SECTION A – P&C 600 FORM**

COUNTY OF SAN DIEGO  
SECTION A-P&C 600 FORM

This is not an order

MAIL OR DELIVER TO:

DEPARTMENT OF PURCHASING & CONTRACTING  
COUNTY OF SAN DIEGO, RFB No. 7405  
5560 OVERLAND AVE., SUITE 270  
SAN DIEGO, CA 92123

ISSUED: APRIL 29, 2016

FOR INFORMATION PLEASE CONTACT:

MAUREEN SCHLENTZ  
MAUREEN.SCHLENTZ@SDCOUNTY.CA.GOV

BID OPENING DATE: MAY 24, 2016

AWARD WILL BE MADE TO THE LOWEST RESPONSIVE,  
RESPONSIBLE BIDDER BASED ON:

- ☐ ALL OR NONE  
☐ EACH LOT  
☒ TOTAL PRICE

UNSPSC Commodity Code: 761216.0000

BIDS MUST BE **RECEIVED** AT THE ABOVE  
ADDRESS PRIOR TO 11:00 A.M.  
ON DATE OF BID OPENING.

PLEASE STATE YOUR LOWEST PRICE  
F.O.B. DESTINATION AND BRAND NAME  
OR TRADE NAME IF APPLICABLE.  
(Please use typewriter or black ink)  
YOUR ENVELOPE MUST INCLUDE RFB NO. 7405

**DESCRIPTION**

THE COUNTY OF SAN DIEGO (COUNTY), DEPARTMENT OF PLANNING AND LAND USE HAS A REQUIREMENT FOR AS NEEDED SOLID WASTE ABATEMENT SERVICES IN ACCORDANCE WITH THE TERMS & CONDITIONS REFLECTED HEREIN.

INITIAL TERM PERIOD: NOVEMBER 1, 2016 THRU OCTOBER 31, 2017  
FIRST OPTION PERIOD: NOVEMBER 1, 2017 THRU OCTOBER 31, 2018  
SECOND OPTION PERIOD: NOVEMBER 1, 2018 THRU OCTOBER 31, 2019  
THIRD OPTION PERIOD: NOVEMBER 1, 2019 THRU OCTOBER 31, 2020  
FOURTH OPTION PERIOD: NOVEMBER 1, 2020 THRU OCTOBER 31, 2021  
FIFTH OPTION PERIOD: NOVEMBER 1, 2021 THRU OCTOBER 31, 2022

PRICING SUBMITTED IS TO REMAIN FIRM FIXED FOR ALL TERM PERIODS IDENTIFIED ABOVE. AWARD WILL BE MADE TO LOWEST RESPONSIVE RESPONSIBLE BIDDER. BIDDERS ARE REQUIRED TO SUBMIT PRICING ON **ALL** ITEMS IN ORDER TO BE CONSIDERED RESPONSIVE. BIDDERS SUBMITTING MORE THAN ONE (1) UNIT PRICE OR RANGE OF UNIT PRICES PER ITEM WILL BE CONSIDERED NON-RESPONSIVE.

ARE YOU ABLE TO COMPLY WITH ALL ITEMS SPECIFIED IN THE SOW? YES: ☒ NO: ☐

**BIDDER ACKNOWLEDGES ADDENDUM NO. 1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]**

SUBJECT TO ACCEPTANCE WITHIN 90 DAYS

PAYMENT TERMS NET 30 DAYS OR % DAY

NAME AND ADDRESS OF BIDDER

ADVANCE DEMOLITION

STREET, CITY, STATE, ZIP

4263 OCEANSIDE BLVD. STE. 106-202

OCEANSIDE, CA. 92056

TELEPHONE: NUMBER (760) 722-0550

FAX TELEPHONE: (760) 722-0560

E-MAIL: MANUEL@ADVANCEDDEMOLITION.COM

NAME AND TITLE OF PERSON AUTHORIZED

TO SIGN OFFER: MANUEL OSUNA - PRESIDENT

*Manuel Osuna* 05/05/16

SIGNATURE

OFFEROR DATE

PRINTED NAME: MANUEL OSUNA

PRINTED TITLE: PRESIDENT

-----NOTIFICATION OF AWARD-----

ACCEPTANCE AS TO ITEM(S) NUMBERED:

(VC No. )

(THIS SECTION FOR COUNTY USE ONLY)

COUNTY OF SAN DIEGO

By:

DATE:

JOHN M. PELLEGRINO, DIRECTOR  
DEPT OF PURCHASING & CONTRACTING

TOTAL AMOUNT

AWARD NO.

NAME AND TITLE OF PROCUREMENT SPECIALIST

**SUBMIT THIS COMPLETED FORM AS PAGE 1 OF THE BID**

County of San Diego  
Department of Purchasing and Contracting  
**REPRESENTATIONS AND CERTIFICATIONS**

The following representations and certifications are to be completed, signed and returned with the offer (the term "offer" includes bids, proposals, quotes or any other submission to provide goods and/or services).

**1. BUSINESS TYPE**

☒ For-profit ☐ Non-profit ☐ Government

Attach proof of status for Non-profit.

**2. INTERLOCKING DIRECTORATE**

In accordance with Board of Supervisors Policy A-79, if Offeror is a non-profit as indicated in paragraph 1 above, Offeror is required to identify any related for-profit subcontractors in which an interlocking directorate, management or ownership relationship exists. If Offeror is a non-profit and will be subcontracting with a related for-profit entity, Offeror must list all such entity(ies) on an attached separate sheet, and authorization must be sought from Board of Supervisors. If Offeror is a non-profit and does not submit such a list, Offeror certifies it has no and will not enter into a subcontract relationship with a related for-profit entity.

**3. BUSINESS REPRESENTATION**

Offeror represents as a part of this offer the following information regarding the ownership, operation, and control of its business:

**3.1.** Are you a local business with a physical address within the County of San Diego? ☒ Yes ☐ No

**3.2.** Are you certified by the State of California as a:

☐ Disabled Veteran Business Enterprise (DVBE)

Certification #: \_\_\_\_\_

☐ Small Business Enterprise (SBE)

Certification #: \_\_\_\_\_

**3.3.** Are you certified by the U.S. Dept Of Veterans' Affairs as:

☐ Veteran Owned Small Business (VOSB)

Certification # \_\_\_\_\_

☐ Service Disabled Veteran Owned Small Business (SDVOSB)

Certification # \_\_\_\_\_

**3.4.** Estimated percentage of work in this offer to be performed or fulfilled locally (within the geographic boundaries of the County of San Diego): 100 %

**4. DEBARMENT, SUSPENSION AND RELATED MATTERS**

**4.1.** Offeror hereby certifies to the best of its knowledge that neither it nor any of its officers:

**4.1.1.** Are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any federal department or agency.

**4.1.2.** Have within a three (3) year period preceding this agreement been convicted of or had a civil judgment rendered against them for commission of fraud or criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

**4.2.** Except as allowed for in Section 4.2.4, Offeror hereby certifies to the best of its knowledge that neither it nor any of its officers:

**4.2.1** Are presently indicted for or otherwise criminally or civilly charged by a government entity (federal, state, or local) with the commission of any of the offenses enumerated in paragraph 4.1.2 of this certification;

**4.2.2** Have within a three (3) year period preceding this agreement had one or more public transactions (federal, state or local) terminated for cause or default;

**4.2.3** Are presently the target or subject of any investigation, accusation or charges by any federal, state or local law enforcement, licensing or certification body.

**4.2.4** If Offeror is unable to certify any of the facts set forth in Sections 4.2.1, 4.2.2 or 4.2.3, it certifies that it has listed on a separate sheet(s) attached to this Representations and Certifications each fact that it cannot certify and the reason it cannot do so. That information must include the specific relevant facts (date(s), contract(s) and individual(s) involved, status of action(s), and any other relevant information) that prevent it from making the requested certifications. The County reserves the right to disqualify an Offeror based upon information disclosed.

**4.3** Offeror has a continuing duty to disclose information until contract award/execution and shall report in writing to the County Department of Purchasing and Contracting within five business days of knowing or have any reason to know any change in status as certified in the preceding paragraphs 4.1 and 4.2.

**4.4** If Offeror or any of its subcontractors, agents or consultants, have previously contracted with the County to perform related work on this project (e.g. preparing components of the statement of work or plans and specifications for this project), Offeror shall identify those previous agreement(s) and submit that list along with the proposal. Other than as may be submitted on said list, Offeror certifies to the best of its knowledge that it and its proposed subcontractors, agents and consultants have not previously contracted with the County to perform work on or related to this project.

**5. CURRENT COST OR PRICING**

Offeror certifies to the best of its knowledge that cost and/or pricing data submitted with this offer, or specifically identified by reference if actual submission of the data is impracticable, are accurate, complete, and current as of the date signed below.

**6. INDEPENDENT PRICING**

Offeror certifies that in relation to this procurement:

**6.1.** The prices in this offer have been arrived at independently, without consultation, communication, or agreement, for the purpose of restricting competition, as to any matter relating to such prices with other offerors, with any competitors, or with any County employee(s) or consultant(s) involved in this or related procurements;

**6.2.** Unless otherwise required by law, the prices that have been quoted in this offer have not been knowingly disclosed by the Offeror and will not knowingly be disclosed by the Offeror prior to opening, in the case of a bid, or prior to award, in the case of a proposal, directly or indirectly to any other Offeror or to any competitor; and

**6.3.** No attempt has been made or will be made by the Offeror to induce any other person or firm to submit or not to submit an offer for the purpose of restricting competition.

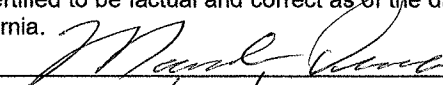
**7. TAX INFORMATION**

The Offeror understands that prior to receiving a contract award from the County, the Offeror must submit a completed IRS W-9 form to provide a Federal Tax ID number, or if not available, to provide a Social Security Number (SSN).

**CERTIFICATION**

The information furnished in Paragraphs 1 through 7 and in the accompanying offer is certified to be factual and correct as of the date submitted and this certification is made under penalty of perjury under the laws of the State of California.

Name: MANUEL OSUNA

Signature: 

Title: PRESIDENT

Date: 05/05/16

Company/Organization: ADVANCE DEMOLITION

**SUBMIT THIS FORM AS DIRECTED IN THE REQUEST FOR SOLICITATION DOCUMENTS OR WITH THE OFFER**

**REQUEST FOR BID (RFB) 7405**  
**PLANNING & DEVELOPMENT SERVICES**  
**AS NEEDED SOLID WASTE ABATEMENT SERVICES**  
**SECTION A – INDEMNIFICATION AGREEMENT**

THE FOLLOWING INDEMNIFICATION AGREEMENT IS TO BE COMPLETED, SIGNED AND  
RETURNED WITH THE OFFER.

This indemnification agreement ("Agreement") is made and entered into by and between the County of San Diego ("County") and ADVANCE DEMOLITION ("Offeror") with reference to the following facts:

WHEREAS the County may receive a request for disclosure of Offeror's submission under the California Public Records Act, Government Code Section 6250, et seq.; and

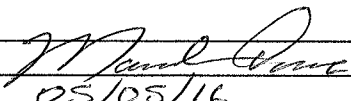
WHEREAS, Offeror has included in its submission an exhibit entitled "*EXHIBIT – CONFIDENTIAL/PROPRIETARY*" containing records that Offeror has determined to constitute trade secrets or other proprietary information exempt from disclosure under the California Public Records Act; and

WHEREAS the County requires defense and indemnity from Offeror for the County's ongoing non-disclosure of Offeror's *EXHIBIT-CONFIDENTIAL/PROPRIETARY*;

NOW, THEREFORE, for good and valuable consideration and the mutual promises contained herein, the parties agree to the following:

1. The above recitals are incorporated herein by this reference.
2. Except as otherwise provided herein, the County will not release Offeror's *EXHIBIT-CONFIDENTIAL/PROPRIETARY* based on Offeror's representation that the records contained therein are proprietary and exempt from disclosure under the California Public Records Act and/or are trade secrets as that term is defined in Government Code Section 6250, et seq.. Notwithstanding the foregoing, however, the County may release Offeror's *EXHIBIT-CONFIDENTIAL/PROPRIETARY* in the event of any of the following:
  - a. Offeror fails to comply with the terms and conditions of this Agreement; or
  - b. Offeror provides the County with written notice that some or all of the records may be released; or
  - c. A court of competent jurisdiction orders the County to release the records and the County has exhausted or waived its appeal rights.
3. To the fullest extent allowed by law, the County shall not be liable for, and Offeror shall defend and indemnify County and its Board of Supervisors, officers, directors, employees and agents of County (collectively "County Parties"), against any and all claims, demands, liability, judgments, awards, fines, mechanics' liens or other liens, labor disputes, losses, damages, expenses, charges or costs of any kind or character, including attorneys' fees (whether incurred by County attorneys or attorneys employed by County) and court costs (hereinafter collectively referred to as "Claims"), related to Offeror's *EXHIBIT-CONFIDENTIAL/PROPRIETARY*.
4. Offeror waives any and all claims in law or equity and hereby releases the County Parties from any and all claims, deductibles, self-insured retentions, demands, liability, judgments, awards, fines, mechanics' liens or other liens, labor disputes, losses, damages, expenses, charges or costs of any kind or character, including attorneys' fees and court costs, which arise out of or are in any way connected to Offeror's *EXHIBIT-CONFIDENTIAL/PROPRIETARY*.

OFFEROR

Name: <u>MANUEL OSUNA</u>	Signature: <u></u>
Title: <u>PRESIDENT</u>	Date: <u>05/05/16</u>
Company/Organization: <u>ADVANCE DEMOLITION</u>	

**SUBMIT THIS COMPLETED FORM AS PAGE 3 OF THE BID**

**REQUEST FOR BID (RFB) 7405**  
**PLANNING & DEVELOPMENT SERVICES**  
**AS NEEDED SOLID WASTE ABATEMENT SERVICES**  
**SECTION A - PRICING SCHEDULE**

All of the following costs shall be prorated accordingly to weight (i.e. ¼ ton=25% of bid, ½ ton=50% of bid).  
 All submitted costs shall include labor, materials and overtime.

Item Number	BASE TERM PERIOD NOV 1, 2016 THROUGH OCT 31, 2017	Cost per Ton to Remove and to Legally Dispose of Nonhazardous Solid Waste per SOW
1	Accessible	\$ 495.00
2	Somewhat Accessible	\$ 540.00
3	Inaccessible	\$ 595.00

Item Number	FIRST OPTION PERIOD NOV 1, 2017 THROUGH OCT 31, 2018	Cost per Ton to Remove and to Legally Dispose of Nonhazardous Solid Waste per SOW
1	Accessible	\$ 505.00
2	Somewhat Accessible	\$ 548.00
3	Inaccessible	\$ 598.00

Item Number	SECOND OPTION PERIOD NOV 1, 2018 THROUGH OCT 31, 2019	Cost per Ton to Remove and Legally Dispose of Nonhazardous Solid Waste per SOW
1	Accessible	\$ 535.00
2	Somewhat Accessible	\$ 560.00
3	Inaccessible	\$ 599.00

Item Number	THIRD OPTION PERIOD NOV 1, 2019 THROUGH OCT 31, 2020	Cost per Ton to Remove and Legally Dispose of Nonhazardous Solid Waste per SOW
1	Accessible	\$ 550.00
2	Somewhat Accessible	\$ 580.00
3	Inaccessible	\$ 610.00

Item Number	FOURTH OPTION PERIOD NOV 1, 2020 THROUGH OCT 31, 2021	Cost per Ton to Remove and Legally Dispose of Nonhazardous Solid Waste per SOW
1	Accessible	\$ 580.00
2	Somewhat Accessible	\$ 599.00
3	Inaccessible	\$ 640.00

Item Number	FIFTH OPTION PERIOD NOV 1, 2021 THROUGH OCT 31, 2022	Cost per Ton to Remove and Legally Dispose of Nonhazardous Solid Waste per SOW
1	Accessible	\$ 599.00
2	Somewhat Accessible	\$ 640.00
3	Inaccessible	\$ 680.00
<b>TOTAL BID (SUM OF ALL COSTS LISTED ABOVE) BASIS OF AWARD</b>		\$

COMPANY NAME: ADVANCE DEMOLITION CONTACT: MANUEL OSUNA  
 PHONE: (760) 234-9719 EMAIL: MANUEL@ADVANCEDDEMOLITION.COM  
 SUBMIT THIS COMPLETED FORM AS PAGE 4 OF THE BID

**REQUEST FOR BID (RFB) 7405**  
**PLANNING & DEVELOPMENT SERVICES**  
**AS NEEDED SOLID WASTE ABATEMENT SERVICES**  
**SECTION A – DESIGNATION OF SUBCONTRACTORS**

Set forth below is the full name and the location of the place of business and the California contractor license number of each Subcontractor whom the Contractor proposes to subcontract portions of the work in excess of one-half of one percent, and the portion of the work which will be done by each Subcontractor for each subcontract.

**NOTE:** The Bidder understands that if the Bidder fails to specify a subcontractor for any portion of the work to be performed under the contract in excess of one-half of one percent of the bid, the Bidder shall be deemed to have agreed to perform such portion, and that the Bidder shall not be permitted to sublet or subcontract that portion of the work except in cases of public emergency or necessity, and then only after a finding, reduced to writing as a public record of the Awarding Authority, setting forth the facts constituting the emergency or necessity in accordance with the provision of the Subletting and Fair Practices act (Section 4100 et seq. of the California Public Contract Code).

The "Business Name and Address", California contractor license number, and "Portion of Work to be Subcontracted" that will be done by each subcontractor are required at time of bid. The remainder of the information shall be submitted by email to the listed contact for this solicitation within 24 hours of bid submittal.

If no subcontractors are to be employed on the project, enter the word "NONE".

PORTION OF WORK TO BE SUBCONTRACTED			SUBCONTRACTOR		
Item #	Description of Work	% of Total Contract	Business Name and Address	License #, Classification(s), and Expiration Date	DIR Registration No.

Total Percent SUBCONTRACTED: 0

**SUBMIT THIS COMPLETED FORM AS PAGE 5 OF THE BID**



**REQUEST FOR BID (RFB) 7405**  
**PLANNING & DEVELOPMENT SERVICES**  
**AS NEEDED SOLID WASTE ABATEMENT SERVICES**  
**SECTION A – DESIGNATION OF SUBCONTRACTORS**

BUSINESS NAME (PRIME)	DIR REGISTRATION NO.	EMAIL ADDRESS (Point of Contact for <u>this</u> Project)
<b>CLASSIFICATIONS TO BE USED FOR <u>THIS</u> PROJECT:</b>		
<input type="checkbox"/> ASBESTOS	<input type="checkbox"/> BOILERMAKER	<input type="checkbox"/> BRICKLAYERS
<input type="checkbox"/> CARPET/LINOLEUM	<input type="checkbox"/> CEMENT MASONS	<input type="checkbox"/> DRYWALL FINISHER
<input type="checkbox"/> ELECTRICIANS	<input type="checkbox"/> ELEVATOR MECHANIC	<input type="checkbox"/> GLAZIERS
<input type="checkbox"/> LABORERS	<input type="checkbox"/> MILLWRIGHTS	<input type="checkbox"/> OPERATING ENG
<input type="checkbox"/> PILE DRIVERS	<input type="checkbox"/> PIPE TRADES	<input type="checkbox"/> PLASTERS
<input type="checkbox"/> SHEET METAL	<input type="checkbox"/> SOUND/COMM	<input type="checkbox"/> SURVEYORS
<input type="checkbox"/> TILE WORKERS		<input type="checkbox"/> CARPENTERS
		<input type="checkbox"/> DRYWALL/LATHERS
		<input type="checkbox"/> IRON WORKERS
		<input type="checkbox"/> PAINTERS
		<input type="checkbox"/> ROOFERS
		<input type="checkbox"/> TEAMSTER
<b>CLASSIFICATIONS TO BE USED FOR <u>THIS</u> PROJECT:</b>		
<input type="checkbox"/> ASBESTOS	<input type="checkbox"/> BOILERMAKER	<input type="checkbox"/> BRICKLAYERS
<input type="checkbox"/> CARPET/LINOLEUM	<input type="checkbox"/> CEMENT MASONS	<input type="checkbox"/> DRYWALL FINISHER
<input type="checkbox"/> ELECTRICIANS	<input type="checkbox"/> ELEVATOR MECHANIC	<input type="checkbox"/> GLAZIERS
<input type="checkbox"/> LABORERS	<input type="checkbox"/> MILLWRIGHTS	<input type="checkbox"/> OPERATING ENG
<input type="checkbox"/> PILE DRIVERS	<input type="checkbox"/> PIPE TRADES	<input type="checkbox"/> PLASTERS
<input type="checkbox"/> SHEET METAL	<input type="checkbox"/> SOUND/COMM	<input type="checkbox"/> SURVEYORS
<input type="checkbox"/> TILE WORKERS		<input type="checkbox"/> CARPENTERS
		<input type="checkbox"/> DRYWALL/LATHERS
		<input type="checkbox"/> IRON WORKERS
		<input type="checkbox"/> PAINTERS
		<input type="checkbox"/> ROOFERS
		<input type="checkbox"/> TEAMSTER
<b>CLASSIFICATIONS TO BE USED FOR <u>THIS</u> PROJECT:</b>		
<input type="checkbox"/> ASBESTOS	<input type="checkbox"/> BOILERMAKER	<input type="checkbox"/> BRICKLAYERS
<input type="checkbox"/> CARPET/LINOLEUM	<input type="checkbox"/> CEMENT MASONS	<input type="checkbox"/> DRYWALL FINISHER
<input type="checkbox"/> ELECTRICIANS	<input type="checkbox"/> ELEVATOR MECHANIC	<input type="checkbox"/> GLAZIERS
<input type="checkbox"/> LABORERS	<input type="checkbox"/> MILLWRIGHTS	<input type="checkbox"/> OPERATING ENG
<input type="checkbox"/> PILE DRIVERS	<input type="checkbox"/> PIPE TRADES	<input type="checkbox"/> PLASTERS
<input type="checkbox"/> SHEET METAL	<input type="checkbox"/> SOUND/COMM	<input type="checkbox"/> SURVEYORS
<input type="checkbox"/> TILE WORKERS		<input type="checkbox"/> CARPENTERS
		<input type="checkbox"/> DRYWALL/LATHERS
		<input type="checkbox"/> IRON WORKERS
		<input type="checkbox"/> PAINTERS
		<input type="checkbox"/> ROOFERS
		<input type="checkbox"/> TEAMSTER

**SUBMIT THIS COMPLETED FORM AS PAGE 6 OF THE BID**

**REQUEST FOR BID (RFB) 7405**  
**PLANNING & DEVELOPMENT SERVICES**  
**AS NEEDED SOLID WASTE ABATEMENT SERVICES**  
**SECTION A – BIDDER/OFFEROR DVBE INFORMATION**

**COUNTY OF SAN DIEGO**  
**BIDDER/OFFEROR DVBE INFORMATION**  
**(DUE WITHIN TWO (2) DAYS OF BID OPENING)**

DATE: \_\_\_\_\_ Bid/Offer No.: \_\_\_\_\_

PROJECT TITLE: \_\_\_\_\_ Project/Activity No.: \_\_\_\_\_

BIDDER/OFFEROR: \_\_\_\_\_

BIDDER/OFFEROR REPRESENTATIVE: \_\_\_\_\_

ITEM NO.	DESCRIPTION OF WORK, SERVICE OR MATERIAL	NAME OF CERTIFIED DVBE (PRIME, SUBCONTRACTOR, VENDOR) TO BE USED INCLUDING ADDRESS, TELEPHONE AND CERTIFICATION NUMBER.	DOLLAR AMOUNT TO BE PAID THIS DVBE
TOTAL DOLLARS TO CERTIFIED DVBE (PRIME/SUBCONTRACTOR VENDOR)			\$

**COMPUTATION OF UTILIZATION AND COMPARISON WITH THE DVBE PARTICIPATION.**

CALCULATION		
Disabled Veterans	$\frac{\text{Total Amount to DVBE}}{\text{Total Bid/Offer}} \times 100 = \text{Percent of Utilization}$	3%
	$\text{_____} \times 100 = \text{_____} \%$	*See DVBE Participation information sections for further information.

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**REQUEST FOR BID (RFB) 7405  
PLANNING & DEVELOPMENT SERVICES  
AS NEEDED SOLID WASTE ABATEMENT SERVICES  
SECTION A – DVBE “GOOD FAITH EFFORT” PACKAGE**

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**COUNTY OF SAN DIEGO  
DVBE “Good Faith Effort” Package**

**Documentation of Good Faith Effort  
(Due within two (2) days of bid opening)**

The DVBE Cover Sheet is to be attached for the required certified DVBE documentation of “Good Faith Effort” estimated by the County to be between \$500,000 and \$1 million.

Date: \_\_\_\_\_ Bid/Offer No.: \_\_\_\_\_

Project Title: \_\_\_\_\_ Project/Activity No. : \_\_\_\_\_

Bidder/Offeror: \_\_\_\_\_

Bidder/Offeror Representative: \_\_\_\_\_

Please check off the following to insure you have included them in your documentation:

- ☐ Documentation of “Good Faith Effort” (3 pages including this page)
- ☐ Attachment of Any Additional Supporting Documentation

N/A

**REQUEST FOR BID (RFB) 7405  
PLANNING & DEVELOPMENT SERVICES  
AS NEEDED SOLID WASTE ABATEMENT SERVICES  
SECTION A – DVBE “GOOD FAITH EFFORT” PACKAGE**

**COUNTY OF SAN DIEGO  
DOCUMENTATION OF GOOD FAITH EFFORT**

- A. List potential DVBEs that the bidder solicited prior to prime contractor bid submittal for participation in this contract along with dates.

Certified DVBE Firm	Date of Contact (Mail, Fax, Telephone, etc.)	Responded (Yes/No)
1. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
2. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
3. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
4. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
5. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
6. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
7. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
8. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
9. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
10. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
11. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
12. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
13. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
14. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
15. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No

B. Solicitations

DVBE Solicitation Sample:

Bidder must attach a sample of the solicitation sent to certified DVBE firms. If phone contact was made, document conversation: date, time, contact person, and business opportunities discussed.

**REQUEST FOR BID (RFB) 7405**

# DOCUMENTATION OF GOOD FAITH EFFORT

Identification of (1) all DVBES who submitted bids or quotations prime contractor bid submittal (2) nature of work, supplies or services offered which are not accepted, (3) dollar amounts of the DVBES bids not accepted, (4) subcontractors and/or suppliers who will be used instead of the DVBES, (5) dollar amounts of these subcontractors and/or suppliers' bids/offers, and (6) the reason for the bidder not accepting the DVBES's bid/offer. Use additional sheets if necessary.

[illegible]

# Request for Taxpayer Identification Number and Certification

Give Form to the  
requester. Do not  
send to the IRS.

**1** Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.  
**Construction Services & Recycling, Inc.**

**2** Business name/disregarded entity name, if different from above  
**DBA Advance Demolition**

**3** Check appropriate box for federal tax classification; check only **one** of the following seven boxes:  
☐ Individual/sole proprietor or single-member LLC  
☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ \_\_\_\_\_  
☐ C Corporation ☒ S Corporation ☐ Partnership ☐ Trust/estate  
**Note.** For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.  
☐ Other (see instructions) ▶ \_\_\_\_\_

**4** Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  
 Exempt payee code (if any) \_\_\_\_\_  
 Exemption from FATCA reporting code (if any) \_\_\_\_\_  
*(Applies to accounts maintained outside the U.S.)*

**5** Address (number, street, and apt. or suite no.)  
**4263 Oceanside Blvd. Ste. 106-202**

**6** City, state, and ZIP code  
**Oceanside, CA. 92056**

**7** List account number(s) here (optional)

**Requester's name and address (optional)**

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

**Social security number**

			-			-			
--	--	--	---	--	--	---	--	--	--

or

**Employer identification number**

2	7	-	0	5	6	6	7	2	1
---	---	---	---	---	---	---	---	---	---

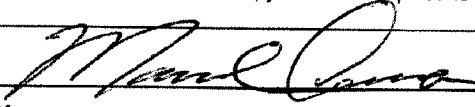
**Note.** If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

## Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

**Sign Here** Signature of U.S. person ▶  Date ▶ 05/05/16

## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at [www.irs.gov/fw9](http://www.irs.gov/fw9).

## Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

YEAR

20 ☐**Withholding Exemption Certificate**

CALIFORNIA FORM

**590**

(This form can only be used to certify exemption from nonresident withholding under California R&amp;TC Section 18662. This form cannot be used for exemption from wage withholding.)

**File this form with your withholding agent.**

(Please type or print)

Withholding agent's name

County of San Diego

Vendor/Payee's name

ADVANCE DEMOLITION

Vendor/Payee's

☐ Social security number☐ SOS no.☐ California corp. no.☒ FEIN**Note:**

Failure to furnish your identification number will make this certificate void.

27-0566721

Vendor/Payee's address (number and street)

4263 OCEANSIDE BLVD. STE. 106-202

APT no.

Private Mailbox no.

Vendor/Payee's daytime telephone no.

(760) 722-0550

City

State

ZIP Code

OCEANSIDECA92056

I certify that for the reasons checked below, the entity or individual named on this form is exempt from the California income tax withholding requirement on payment(s) made to the entity or individual. Read the following carefully and check the box that applies to the vendor/payee:

☐ **Individuals — Certification of Residency:**

I am a resident of California and I reside at the address shown above. If I become a nonresident at any time, I will promptly inform the withholding agent. See instructions for Form 590, General Information D, for the definition of a resident.

☒ **Corporations:**

The above-named corporation has a permanent place of business in California at the address shown above or is qualified through the California Secretary of State to do business in California. The corporation will withhold on payments of California source income to nonresidents when required. If this corporation ceases to have a permanent place of business in California or ceases to be qualified to do business in California, I will promptly inform the withholding agent. See instructions for Form 590, General Information E, for the definition of permanent place of business.

☐ **Partnerships:**

The above-named partnership has a permanent place of business in California at the address shown above or is registered with the California Secretary of State, and is subject to the laws of California. The partnership will file a California tax return and will withhold on foreign and domestic nonresident partners when required. If the partnership ceases to do any of the above, I will promptly inform the withholding agent. **Note:** For withholding purposes, a Limited Liability Partnership is treated like any other partnership.

☐ **Limited Liability Companies (LLC):**

The above-named LLC has a permanent place of business in California at the address shown above or is registered with the California Secretary of State, and is subject to the laws of California. The LLC will file a California tax return and will withhold on foreign and domestic nonresident members when required. If the LLC ceases to do any of the above, I will promptly inform the withholding agent.

☐ **Tax-Exempt Entities:**

The above-named entity is exempt from tax under California or federal law. The tax-exempt entity will withhold on payments of California source income to nonresidents when required. If this entity ceases to be exempt from tax, I will promptly inform the withholding agent.

☐ **Insurance Companies, IRAs, or Qualified Pension/Profit Sharing Plans:**

The above-named entity is an insurance company, IRA, or a federally qualified pension or profit-sharing plan.

☐ **California Irrevocable Trusts:**

At least one trustee of the above-named irrevocable trust is a California resident. The trust will file a California fiduciary tax return and will withhold on foreign and domestic nonresident beneficiaries when required. If the trustee becomes a nonresident at any time, I will promptly inform the withholding agent.

☐ **Estates — Certification of Residency of Deceased Person:**

I am the executor of the above-named person's estate. The decedent was a California resident at the time of death. The estate will file a California fiduciary tax return and will withhold on foreign and domestic nonresident beneficiaries when required.

**CERTIFICATE:** Please complete and sign below.

Under penalties of perjury, I hereby certify that the information provided herein is, to the best of my knowledge, true and correct. If conditions change, I will promptly inform the withholding agent. MANUEL OSUNA FOR

Vendor/Payee's name and title (type or print)

ADVANCE DEMOLITION - PRESIDENT

Vendor/Payee's signature ▶

Manuel Osuna

Date

05/05/16



Anton's Service, Inc.

PO Box 455

Lakeside, CA 92040

To: County of San Diego

RFB: 7405

Date: May 24, 2016

Time: 11:00 am

SD CNTY PURCH \*16 MAY 24 AM 10:39

#2 He

Bid Submittal: Do not open



**REQUEST FOR BID (RFB) 7405  
PLANNING & DEVELOPMENT SERVICES  
AS NEEDED SOLID WASTE ABATEMENT SERVICES  
SECTION A – P&C 600 FORM**

COUNTY OF SAN DIEGO  
SECTION A-P&C 600 FORM

**This is not an order**

MAIL OR DELIVER TO:

DEPARTMENT OF PURCHASING & CONTRACTING  
COUNTY OF SAN DIEGO, RFB No. 7405  
5560 OVERLAND AVE., SUITE 270  
SAN DIEGO, CA 92123

AWARD WILL BE MADE TO THE LOWEST RESPONSIVE,  
RESPONSIBLE BIDDER BASED ON:

- ☐ ALL OR NONE  
☐ EACH LOT  
☒ TOTAL PRICE

UNSPSC Commodity Code: 761216.0000

ISSUED: APRIL 29, 2016

FOR INFORMATION PLEASE CONTACT:

MAUREEN SCHLENTZ  
MAUREEN.SCHLENTZ@SDCOUNTY.CA.GOV

**BID OPENING DATE: MAY 24, 2016**

**BIDS MUST BE RECEIVED AT THE ABOVE  
ADDRESS PRIOR TO 11:00 A.M.  
ON DATE OF BID OPENING.**

PLEASE STATE YOUR LOWEST PRICE  
F.O.B. DESTINATION AND BRAND NAME  
OR TRADE NAME IF APPLICABLE.  
**(Please use typewriter or black ink)**  
**YOUR ENVELOPE MUST INCLUDE RFB NO. 7405**

**DESCRIPTION**

THE COUNTY OF SAN DIEGO (COUNTY), DEPARTMENT OF PLANNING AND LAND USE HAS A REQUIREMENT FOR AS NEEDED SOLID WASTE ABATEMENT SERVICES IN ACCORDANCE WITH THE TERMS & CONDITIONS REFLECTED HEREIN.

INITIAL TERM PERIOD: NOVEMBER 1, 2016 THRU OCTOBER 31, 2017  
FIRST OPTION PERIOD: NOVEMBER 1, 2017 THRU OCTOBER 31, 2018  
SECOND OPTION PERIOD: NOVEMBER 1, 2018 THRU OCTOBER 31, 2019  
THIRD OPTION PERIOD: NOVEMBER 1, 2019 THRU OCTOBER 31, 2020  
FOURTH OPTION PERIOD: NOVEMBER 1, 2020 THRU OCTOBER 31, 2021  
FIFTH OPTION PERIOD: NOVEMBER 1, 2021 THRU OCTOBER 31, 2022

PRICING SUBMITTED IS TO REMAIN FIRM FIXED FOR ALL TERM PERIODS IDENTIFIED ABOVE. AWARD WILL BE MADE TO LOWEST RESPONSIVE RESPONSIBLE BIDDER. BIDDERS ARE REQUIRED TO SUBMIT PRICING ON ALL ITEMS IN ORDER TO BE CONSIDERED RESPONSIVE. BIDDERS SUBMITTING MORE THAN ONE (1) UNIT PRICE OR RANGE OF UNIT PRICES PER ITEM WILL BE CONSIDERED NON-RESPONSIVE.

ARE YOU ABLE TO COMPLY WITH ALL ITEMS SPECIFIED IN THE SOW? YES: X NO: \_\_\_\_\_

**BIDDER ACKNOWLEDGES ADDENDUM NO. 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐**

SUBJECT TO ACCEPTANCE WITHIN 90 DAYS

PAYMENT TERMS NET 30 DAYS OR % DAY

NAME AND ADDRESS OF BIDDER *Anton's Service Inc.*

STREET, CITY, STATE, ZIP *PO Box 455  
Lakeside, CA 92040*

TELEPHONE: NUMBER ( *619* ) *579-9000*

FAX TELEPHONE: ( *619* ) *744-5577*

E-MAIL *anton@antonservice.com*

NAME AND TITLE OF PERSON AUTHORIZED

TO SIGN OFFER:

SIGNATURE

OFFEROR DATE

PRINTED NAME: *Anton Botter B*

PRINTED TITLE: *President*

-----NOTIFICATION OF AWARD-----

ACCEPTANCE AS TO ITEM(S) NUMBERED:

(VC No. )

|(THIS SECTION FOR COUNTY USE ONLY)

COUNTY OF SAN DIEGO

By:

DATE:

JOHN M. PELLEGRINO, DIRECTOR  
DEPT OF PURCHASING & CONTRACTING

TOTAL AMOUNT

AWARD NO.

NAME AND TITLE OF PROCUREMENT SPECIALIST

**SUBMIT THIS COMPLETED FORM AS PAGE 1 OF THE BID**

County of San Diego  
Department of Purchasing and Contracting  
**REPRESENTATIONS AND CERTIFICATIONS**

The following representations and certifications are to be completed, signed and returned with the offer (the term "offer" includes bids, proposals, quotes or any other submission to provide goods and/or services).

**1. BUSINESS TYPE**

☒ For-profit ☐ Non-profit ☐ Government

Attach proof of status for Non-profit.

**2. INTERLOCKING DIRECTORATE**

In accordance with Board of Supervisors Policy A-79, if Offeror is a non-profit as indicated in paragraph 1 above, Offeror is required to identify any related for-profit subcontractors in which an interlocking directorate, management or ownership relationship exists. If Offeror is a non-profit and will be subcontracting with a related for-profit entity, Offeror must list all such entity(ies) on an attached separate sheet, and authorization must be sought from Board of Supervisors. If Offeror is a non-profit and does not submit such a list, Offeror certifies it has no and will not enter into a subcontract relationship with a related for-profit entity.

**3. BUSINESS REPRESENTATION**

Offeror represents as a part of this offer the following information regarding the ownership, operation, and control of its business:

3.1. Are you a local business with a physical address within the County of San Diego? ☒ Yes ☐ No

3.2. Are you certified by the State of California as a:

☐ Disabled Veteran Business Enterprise (DVBE)

Certification #:

☒ Small Business Enterprise (SBE)

Certification #: 42379

3.3. Are you certified by the U.S. Dept Of Veterans' Affairs as:

☐ Veteran Owned Small Business (VOSB)

Certification #

☐ Service Disabled Veteran Owned Small Business (SDVOSB)

Certification #

3.4. Estimated percentage of work in this offer to be performed or fulfilled locally (within the geographic boundaries of the County of San Diego): 100 %

**4. DEBARMENT, SUSPENSION AND RELATED MATTERS**

4.1. Offeror hereby certifies to the best of its knowledge that neither it nor any of its officers:

4.1.1. Are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any federal department or agency.

4.1.2. Have within a three (3) year period preceding this agreement been convicted of or had a civil judgment rendered against them for commission of fraud or criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

4.2. Except as allowed for in Section 4.2.4, Offeror hereby certifies to the best of its knowledge that neither it nor any of its officers:

4.2.1. Are presently indicted for or otherwise criminally or civilly charged by a government entity (federal, state, or local) with the commission of any of the offenses enumerated in paragraph 4.1.2 of this certification;

4.2.2. Have within a three (3) year period preceding this agreement had one or more public transactions (federal, state or local) terminated for cause or default;

4.2.3. Are presently the target or subject of any investigation, accusation or charges by any federal, state or local law enforcement, licensing or certification body.

4.2.4. If Offeror is unable to certify any of the facts set forth in Sections 4.2.1, 4.2.2 or 4.2.3, it certifies that it has listed on a separate sheet(s) attached to this Representations and Certifications each fact that it cannot certify and the reason it cannot do so. That information must include the specific relevant facts (date(s), contract(s) and individual(s) involved, status of action(s), and any other relevant information) that prevent it from making the requested certifications. The County reserves the right to disqualify an Offeror based upon information disclosed.

4.3. Offeror has a continuing duty to disclose information until contract award/execution and shall report in writing to the County Department of Purchasing and Contracting within five business days of knowing or have any reason to know any change in status as certified in the preceding paragraphs 4.1 and 4.2.

4.4. If Offeror or any of its subcontractors, agents or consultants, have previously contracted with the County to perform related work on this project (e.g. preparing components of the statement of work or plans and specifications for this project), Offeror shall identify those previous agreement(s) and submit that list along with the proposal. Other than as may be submitted on said list, Offeror certifies to the best of its knowledge that it and its proposed subcontractors, agents and consultants have not previously contracted with the County to perform work on or related to this project.

**5. CURRENT COST OR PRICING**

Offeror certifies to the best of its knowledge that cost and/or pricing data submitted with this offer, or specifically identified by reference if actual submission of the data is impracticable, are accurate, complete, and current as of the date signed below.

**6. INDEPENDENT PRICING**

Offeror certifies that in relation to this procurement:

6.1. The prices in this offer have been arrived at independently, without consultation, communication, or agreement, for the purpose of restricting competition, as to any matter relating to such prices with other offerors, with any competitors, or with any County employee(s) or consultant(s) involved in this or related procurements;

6.2. Unless otherwise required by law, the prices that have been quoted in this offer have not been knowingly disclosed by the Offeror and will not knowingly be disclosed by the Offeror prior to opening, in the case of a bid, or prior to award, in the case of a proposal, directly or indirectly to any other Offeror or to any competitor; and

6.3. No attempt has been made or will be made by the Offeror to induce any other person or firm to submit or not to submit an offer for the purpose of restricting competition.

**7. TAX INFORMATION**

The Offeror understands that prior to receiving a contract award from the County, the Offeror must submit a completed IRS W-9 form to provide a Federal Tax ID number, or if not available, to provide a Social Security Number (SSN).

**CERTIFICATION**

The information furnished in Paragraphs 1 through 7 and in the accompanying offer is certified to be factual and correct as of the date submitted and this certification is made under penalty of perjury under the laws of the State of California.

Name: Anton Botter

Signature: [Signature]

Title: President

Date: 5-24-2016

Company/Organization: Anton's Service Inc.

**SUBMIT THIS FORM AS DIRECTED IN THE REQUEST FOR SOLICITATION DOCUMENTS OR WITH THE OFFER**

**REQUEST FOR BID (RFB) 7405  
PLANNING & DEVELOPMENT SERVICES  
AS NEEDED SOLID WASTE ABATEMENT SERVICES  
SECTION A – INDEMNIFICATION AGREEMENT**

THE FOLLOWING INDEMNIFICATION AGREEMENT IS TO BE COMPLETED, SIGNED AND  
RETURNED WITH THE OFFER.

This indemnification agreement ("Agreement") is made and entered into by and between the County of San Diego ("County") and Anton's Service Inc. ("Offeror") with reference to the following facts:

WHEREAS the County may receive a request for disclosure of Offeror's submission under the California Public Records Act, Government Code Section 6250, et seq.; and

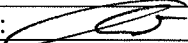
WHEREAS, Offeror has included in its submission an exhibit entitled "*EXHIBIT – CONFIDENTIAL/PROPRIETARY*" containing records that Offeror has determined to constitute trade secrets or other proprietary information exempt from disclosure under the California Public Records Act; and

WHEREAS the County requires defense and indemnity from Offeror for the County's ongoing non-disclosure of Offeror's *EXHIBIT-CONFIDENTIAL/PROPRIETARY*;

NOW, THEREFORE, for good and valuable consideration and the mutual promises contained herein, the parties agree to the following:

1. The above recitals are incorporated herein by this reference.
2. Except as otherwise provided herein, the County will not release Offeror's *EXHIBIT-CONFIDENTIAL/PROPRIETARY* based on Offeror's representation that the records contained therein are proprietary and exempt from disclosure under the California Public Records Act and/or are trade secrets as that term is defined in Government Code Section 6250, et seq.. Notwithstanding the foregoing, however, the County may release Offeror's *EXHIBIT-CONFIDENTIAL/PROPRIETARY* in the event of any of the following:
  - a. Offeror fails to comply with the terms and conditions of this Agreement; or
  - b. Offeror provides the County with written notice that some or all of the records may be released; or
  - c. A court of competent jurisdiction orders the County to release the records and the County has exhausted or waived its appeal rights.
3. To the fullest extent allowed by law, the County shall not be liable for, and Offeror shall defend and indemnify County and its Board of Supervisors, officers, directors, employees and agents of County (collectively "County Parties"), against any and all claims, demands, liability, judgments, awards, fines, mechanics' liens or other liens, labor disputes, losses, damages, expenses, charges or costs of any kind or character, including attorneys' fees (whether incurred by County attorneys or attorneys employed by County) and court costs (hereinafter collectively referred to as "Claims"), related to Offeror's *EXHIBIT-CONFIDENTIAL/PROPRIETARY*.
4. Offeror waives any and all claims in law or equity and hereby releases the County Parties from any and all claims, deductibles, self-insured retentions, demands, liability, judgments, awards, fines, mechanics' liens or other liens, labor disputes, losses, damages, expenses, charges or costs of any kind or character, including attorneys' fees and court costs, which arise out of or are in any way connected to Offeror's *EXHIBIT-CONFIDENTIAL/PROPRIETARY*.

OFFEROR

Name: <u>Anton Boller D</u>	Signature: 
Title:	Date: <u>5-24-2016</u>
Company/Organization: <u>Anton's Service Inc.</u>	

**SUBMIT THIS COMPLETED FORM AS PAGE 3 OF THE BID**

**REQUEST FOR BID (RFB) 7405**  
**PLANNING & DEVELOPMENT SERVICES**  
**AS NEEDED SOLID WASTE ABATEMENT SERVICES**  
**SECTION A - PRICING SCHEDULE**

All of the following costs shall be prorated accordingly to weight (i.e. ¼ ton=25% of bid, ½ ton=50% of bid).  
 All submitted costs shall include labor, materials and overtime.

Item Number	BASE TERM PERIOD NOV 1, 2016 THROUGH OCT 31, 2017	Cost per Ton to Remove and to Legally Dispose of Nonhazardous Solid Waste per SOW
1	Accessible	\$ 625.00
2	Somewhat Accessible	\$ 625.00
3	Inaccessible	\$ 625.00

Item Number	FIRST OPTION PERIOD NOV 1, 2017 THROUGH OCT 31, 2018	Cost per Ton to Remove and to Legally Dispose of Nonhazardous Solid Waste per SOW
1	Accessible	\$ 655.00
2	Somewhat Accessible	\$ 655.00
3	Inaccessible	\$ 655.00

Item Number	SECOND OPTION PERIOD NOV 1, 2018 THROUGH OCT 31, 2019	Cost per Ton to Remove and to Legally Dispose of Nonhazardous Solid Waste per SOW
1	Accessible	\$ 685.00
2	Somewhat Accessible	\$ 685.00
3	Inaccessible	\$ 685.00

Item Number	THIRD OPTION PERIOD NOV 1, 2019 THROUGH OCT 31, 2020	Cost per Ton to Remove and to Legally Dispose of Nonhazardous Solid Waste per SOW
1	Accessible	\$ 715.00
2	Somewhat Accessible	\$ 715.00
3	Inaccessible	\$ 715.00

Item Number	FOURTH OPTION PERIOD NOV 1, 2020 THROUGH OCT 31, 2021	Cost per Ton to Remove and to Legally Dispose of Nonhazardous Solid Waste per SOW
1	Accessible	\$ 745.00
2	Somewhat Accessible	\$ 745.00
3	Inaccessible	\$ 745.00

Item Number	FIFTH OPTION PERIOD NOV 1, 2021 THROUGH OCT 31, 2022	Cost per Ton to Remove and to Legally Dispose of Nonhazardous Solid Waste per SOW
1	Accessible	\$ 775.00
2	Somewhat Accessible	\$ 775.00
3	Inaccessible	\$ 775.00
<b>TOTAL BID (SUM OF ALL COSTS LISTED ABOVE) BASIS OF AWARD</b>		\$ 12,600.00

COMPANY NAME: Anton's Service Inc. CONTACT: Anton Boker Jr

PHONE: 614-579-9000 EMAIL: anton@antonservice.com

**SUBMIT THIS COMPLETED FORM AS PAGE 4 OF THE BID**

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**REQUEST FOR BID (RFB) 7405**  
**PLANNING & DEVELOPMENT SERVICES**  
**AS NEEDED SOLID WASTE ABATEMENT SERVICES**  
**SECTION A – DESIGNATION OF SUBCONTRACTORS**

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Set forth below is the full name and the location of the place of business and the California contractor license number of each Subcontractor whom the Contractor proposes to subcontract portions of the work in excess of one-half of one percent, and the portion of the work which will be done by each Subcontractor for each subcontract.

**NOTE:** The Bidder understands that if the Bidder fails to specify a subcontractor for any portion of the work to be performed under the contract in excess of one-half of one percent of the bid, the Bidder shall be deemed to have agreed to perform such portion, and that the Bidder shall not be permitted to sublet or subcontract that portion of the work except in cases of public emergency or necessity, and then only after a finding, reduced to writing as a public record of the Awarding Authority, setting forth the facts constituting the emergency or necessity in accordance with the provision of the Subletting and Fair Practices act (Section 4100 et seq. of the California Public Contract Code).

The "Business Name and Address", California contractor license number, and "Portion of Work to be Subcontracted" that will be done by each subcontractor are required at time of bid. The remainder of the information shall be submitted by email to the listed contact for this solicitation within 24 hours of bid submittal.

**If no subcontractors are to be employed on the project, enter the word "NONE".**

PORTION OF WORK TO BE SUBCONTRACTED			SUBCONTRACTOR		
Item #	Description of Work	% of Total Contract	Business Name and Address	License #, Classification(s), and Expiration Date	DIR Registration No.
	<i>None</i>				

Total Percent SUBCONTRACTED: 0%

**SUBMIT THIS COMPLETED FORM AS PAGE 5 OF THE BID**

**REQUEST FOR BID (RFB) 7405**  
**PLANNING & DEVELOPMENT SERVICES**  
**AS NEEDED SOLID WASTE ABATEMENT SERVICES**  
**SECTION A – DESIGNATION OF SUBCONTRACTORS**

BUSINESS NAME (PRIME)		DIR REGISTRATION NO.		EMAIL ADDRESS (Point of Contact for <u>this</u> Project)			
<i>Antoni's Service Inc.</i>		<i>1000002533</i>		<i>antone@antonservice.com</i>			
CLASSIFICATIONS TO BE USED FOR <u>THIS</u> PROJECT:							
<input type="checkbox"/>	ASBESTOS	<input type="checkbox"/>	BOILERMAKER	<input type="checkbox"/>	BRICKLAYERS	<input type="checkbox"/>	CARPENTERS
<input type="checkbox"/>	CARPET/LINOLEUM	<input type="checkbox"/>	CEMENT MASONS	<input type="checkbox"/>	DRYWALL FINISHER	<input type="checkbox"/>	DRYWALL/LATHERS
<input type="checkbox"/>	ELECTRICIANS	<input type="checkbox"/>	ELEVATOR MECHANIC	<input type="checkbox"/>	GLAZIERS	<input type="checkbox"/>	IRON WORKERS
<input checked="" type="checkbox"/>	LABORERS	<input type="checkbox"/>	MILLWRIGHTS	<input checked="" type="checkbox"/>	OPERATING ENG	<input type="checkbox"/>	PAINTERS
<input type="checkbox"/>	PILE DRIVERS	<input type="checkbox"/>	PIPE TRADES	<input type="checkbox"/>	PLASTERS	<input type="checkbox"/>	ROOFERS
<input type="checkbox"/>	SHEET METAL	<input type="checkbox"/>	SOUND/COMM	<input type="checkbox"/>	SURVEYORS	<input type="checkbox"/>	TEAMSTER
<input type="checkbox"/>	TILE WORKERS						
BUSINESS NAME (SUB)		DIR REGISTRATION NO.		EMAIL ADDRESS (Point of Contact for <u>this</u> Project)			
CLASSIFICATIONS TO BE USED FOR <u>THIS</u> PROJECT:							
<input type="checkbox"/>	ASBESTOS	<input type="checkbox"/>	BOILERMAKER	<input type="checkbox"/>	BRICKLAYERS	<input type="checkbox"/>	CARPENTERS
<input type="checkbox"/>	CARPET/LINOLEUM	<input type="checkbox"/>	CEMENT MASONS	<input type="checkbox"/>	DRYWALL FINISHER	<input type="checkbox"/>	DRYWALL/LATHERS
<input type="checkbox"/>	ELECTRICIANS	<input type="checkbox"/>	ELEVATOR MECHANIC	<input type="checkbox"/>	GLAZIERS	<input type="checkbox"/>	IRON WORKERS
<input type="checkbox"/>	LABORERS	<input type="checkbox"/>	MILLWRIGHTS	<input type="checkbox"/>	OPERATING ENG	<input type="checkbox"/>	PAINTERS
<input type="checkbox"/>	PILE DRIVERS	<input type="checkbox"/>	PIPE TRADES	<input type="checkbox"/>	PLASTERS	<input type="checkbox"/>	ROOFERS
<input type="checkbox"/>	SHEET METAL	<input type="checkbox"/>	SOUND/COMM	<input type="checkbox"/>	SURVEYORS	<input type="checkbox"/>	TEAMSTER
<input type="checkbox"/>	TILE WORKERS						
BUSINESS NAME (SUB)		DIR REGISTRATION NO.		EMAIL ADDRESS (Point of Contact for <u>this</u> Project)			
CLASSIFICATIONS TO BE USED FOR <u>THIS</u> PROJECT:							
<input type="checkbox"/>	ASBESTOS	<input type="checkbox"/>	BOILERMAKER	<input type="checkbox"/>	BRICKLAYERS	<input type="checkbox"/>	CARPENTERS
<input type="checkbox"/>	CARPET/LINOLEUM	<input type="checkbox"/>	CEMENT MASONS	<input type="checkbox"/>	DRYWALL FINISHER	<input type="checkbox"/>	DRYWALL/LATHERS
<input type="checkbox"/>	ELECTRICIANS	<input type="checkbox"/>	ELEVATOR MECHANIC	<input type="checkbox"/>	GLAZIERS	<input type="checkbox"/>	IRON WORKERS
<input type="checkbox"/>	LABORERS	<input type="checkbox"/>	MILLWRIGHTS	<input type="checkbox"/>	OPERATING ENG	<input type="checkbox"/>	PAINTERS
<input type="checkbox"/>	PILE DRIVERS	<input type="checkbox"/>	PIPE TRADES	<input type="checkbox"/>	PLASTERS	<input type="checkbox"/>	ROOFERS
<input type="checkbox"/>	SHEET METAL	<input type="checkbox"/>	SOUND/COMM	<input type="checkbox"/>	SURVEYORS	<input type="checkbox"/>	TEAMSTER
<input type="checkbox"/>	TILE WORKERS						

**SUBMIT THIS COMPLETED FORM AS PAGE 6 OF THE BID**

**REQUEST FOR BID (RFB) 7405**  
**PLANNING & DEVELOPMENT SERVICES**  
**AS NEEDED SOLID WASTE ABATEMENT SERVICES**  
**SECTION A – BIDDER/OFFEROR DVBE INFORMATION**

**COUNTY OF SAN DIEGO**  
**BIDDER/OFFEROR DVBE INFORMATION**  
**(DUE WITHIN TWO (2) DAYS OF BID OPENING)**

DATE: \_\_\_\_\_ Bid/Offer No.: \_\_\_\_\_

PROJECT TITLE: \_\_\_\_\_ Project/Activity No.: \_\_\_\_\_

BIDDER/OFFEROR: \_\_\_\_\_

BIDDER/OFFEROR REPRESENTATIVE: \_\_\_\_\_

ITEM NO.	DESCRIPTION OF WORK, SERVICE OR MATERIAL	NAME OF CERTIFIED DVBE (PRIME, SUBCONTRACTOR, VENDOR) TO BE USED INCLUDING ADDRESS, TELEPHONE AND CERTIFICATION NUMBER.	DOLLAR AMOUNT TO BE PAID THIS DVBE
TOTAL DOLLARS TO CERTIFIED DVBE (PRIME,/SUBCONTRACTORVENDOR)			\$

**COMPUTATION OF UTILIZATION AND COMPARISON WITH THE DVBE PARTICIPATION.**

CALCULATION		
Disabled Veterans	$\frac{\text{Total Amount to DVBE}}{\text{Total Bid/Offer}} \times 100 = \text{Percent of Utilization}$ $\text{_____} \times 100 = \text{_____} \%$	3% *See DVBE Participation information sections for further information.

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**REQUEST FOR BID (RFB) 7405  
PLANNING & DEVELOPMENT SERVICES  
AS NEEDED SOLID WASTE ABATEMENT SERVICES  
SECTION A – DVBE “GOOD FAITH EFFORT” PACKAGE**

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**COUNTY OF SAN DIEGO  
DVBE “Good Faith Effort” Package**

**Documentation of Good Faith Effort  
(Due within two (2) days of bid opening)**

The DVBE Cover Sheet is to be attached for the required certified DVBE documentation of “Good Faith Effort” estimated by the County to be between \$500,000 and \$1 million.

Date: \_\_\_\_\_

Bid/Offer No.: \_\_\_\_\_

Project Title: \_\_\_\_\_

Project/Activity No. : \_\_\_\_\_

Bidder/Offeror: \_\_\_\_\_

Bidder/Offeror Representative: \_\_\_\_\_

Please check off the following to insure you have included them in your documentation:

- ☐ Documentation of “Good Faith Effort” (3 pages including this page)
- ☐ Attachment of Any Additional Supporting Documentation



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**REQUEST FOR BID (RFB) 7405  
PLANNING & DEVELOPMENT SERVICES  
AS NEEDED SOLID WASTE ABATEMENT SERVICES  
SECTION A – DVBE “GOOD FAITH EFFORT” PACKAGE**

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**COUNTY OF SAN DIEGO  
DOCUMENTATION OF GOOD FAITH EFFORT**

- A. List potential DVBEs that the bidder solicited prior to prime contractor bid submittal for participation in this contract along with dates.

Certified DVBE Firm	Date of Contact (Mail, Fax, Telephone, etc.)	Responded (Yes/No)
1. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
2. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
3. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
4. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
5. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
6. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
7. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
8. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
9. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
10. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
11. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
12. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
13. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
14. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
15. _____		<input type="checkbox"/> Yes <input type="checkbox"/> No

- B. Solicitations  
DVBE Solicitation Sample:  
Bidder must attach a sample of the solicitation sent to certified DVBE firms. If phone contact was made, document conversation: date, time, contact person, and business opportunities discussed.

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**REQUEST FOR BID (RFB) 7405  
PLANNING & DEVELOPMENT SERVICES  
AS NEEDED SOLID WASTE ABATEMENT SERVICES  
SECTION A – DVBE “GOOD FAITH EFFORT” PACKAGE**

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**DOCUMENTATION OF GOOD FAITH EFFORT**

Identification of (1) all DVBEs who submitted bids or quotations prime contractor bid submittal (2) nature of work, supplies or services offered which are not accepted, (3) dollar amounts of the DVBEs bids not accepted, (4) subcontractors and/or suppliers who will be used instead of the DVBEs, (5) dollar amounts of these subcontractors and/or suppliers' bids/offers, and (6) the reason for the bidder not accepting the DVBE's bid/offer. Use additional sheets if necessary.

Name of DVBE (1)	Nature of Work (2)	DVBE Bids/Offer(\$) (3)	Subcontractor/ Supplier to be used (4)	Bid/Offer Amount Accepted (5)	Reason Not Accepted (6)